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APPLICANTS

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**** CONTINUING DATA *******

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****

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Verified and Acknowledged Examiner's Signature Initials					

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TITLE

Novel derivatives of cyclodextrins

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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